

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S
DOCKET NUMBER
P-01,0212

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"LIGHT SOURCE ELEMENT WITH LATERAL, OBLIQUE LIGHT INFEED"

the specification of which (check only one item below):

- ☐ is attached hereto.
- ☐ was filed as United States application
Serial No. _____
on _____,
and was amended
on _____ (if applicable).
- ☒ was filed as PCT international application
Number PCT/DE99/04125
on 29 December 1999,
and was amended under PCT Article 19
on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	198 60 696.6	29, December 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Germany	198 60 697.4	29, December 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Germany	198 60 695.8	29, December 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (combined) <small>(Includes Reference to PCT International Applications)</small>				ATTORNEY'S DOCKET NO. P-01,0212	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER		U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint all Attorneys identified by United States Patent & Trademark Office Customer Number 26574 , who are all members of the Firm Schiff Hardin & Waite.					
Send Correspondence to:			Direct Telephone Calls to:		
SCHIFF HARDIN & WAITE Patent Department 6600 Sears Tower, Chicago, Illinois 60606-6473			(312) 258-5786		
201	FULL NAME OF INVENTOR	FAMILY NAME SCHELLHORN	FIRST GIVEN NAME Franz	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Regensburg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Dr. Johann-Maier-Str. 14	CITY 94049 Regensburg	STATE & ZIP CODE/COUNTRY Germany	
202	FULL NAME OF INVENTOR	FAMILY NAME KIRCHBERGER	FIRST GIVEN NAME Günter	SECOND GIVEN NAME	
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS Waldstr. 50	CITY 93161 Sinzing	STATE & ZIP CODE/COUNTRY Germany	
203	FULL NAME OF INVENTOR	FAMILY NAME WATL	FIRST GIVEN NAME Günter	SECOND GIVEN NAME	
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204	FULL NAME OF INVENTOR	FAMILY NAME BRUNNER	FIRST GIVEN NAME Herbert	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Regensburg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Winklergasse 16	CITY 93047 Regensburg	STATE & ZIP CODE/COUNTRY Germany	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201 _____ DATE _____			SIGNATURE OF INVENTOR 202 _____ DATE _____		
SIGNATURE OF INVENTOR 203 _____ DATE _____			SIGNATURE OF INVENTOR 204 _____ DATE _____		